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**Program Title:** Emergency Assistance for Earthquake Affected

Displaced Persons in Bam, Iran

Country/Region: Bam, Iran
Type of Disaster/Hazard: Earthquake

**Proposed Period of Activity:** Seven Months (Feb. 16, 2004 – Sept. 25, 2004)

**Date of Submission:**November 23, 2004 **Grant Agreement No:**DFD-G-00-04-00069-00

**Number of Beneficiaries:** 30,000 earthquake affected persons

**Total budget from OFDA:** \$829,639

### PROJECT SUMMARY

With funding from OFDA, Mercy Corps has successfully completed implementation of a multisector response to the earthquake in Bam of December 26, 2003. The main activities of the project were in the sectors of health, water and sanitation and non-food-item provision.

A total of approximately 40,000 beneficiaries were directly assisted by one or more of the activities under this project. Major accomplishments include the provision of latrines and showers to almost 7,000 people, the construction of two fully equipped health houses and flagship support to over 2,000 earthquake displaced camp residents (in terms of non-food items, sanitation facilities and shelter). Also important was Mercy Corps' delivery of material support and training to public health initiatives in the critical months after the initial emergency response was complete and the risk of water borne disease outbreaks was highest.

Having responded quickly to the disaster and completed an initial needs assessment, Mercy Corps submitted a proposal to meet the priority needs of earthquake survivors to OFDA on January 13,

which was approved on February 16. Two subsequent amendments to the project were requested and approved in April and June respectively. Interim reports were submitted to OFDA in June and August. Mercy Corps has adapted its mode of implementation in accordance with changes in the operating environment and the developing needs of beneficiaries, whilst maintaining a strong hold on the project's original objectives. This is the final report to OFDA, with all achievements and activities explained in detail.

**THE PROJECT GOAL** for Mercy Corps was to help minimize loss of life and human suffering of earthquake affected displaced persons in Bam, Iran, under the three main objectives outlined below.

The target population was approximately 40,000 earthquake affected persons in the city of Bam and surrounding areas. They were all displaced from their homes by the earthquake and had minimal coping mechanisms.

#### PROGRAM ACHIEVEMENTS BY OBJECTIVES

OBJECTIVE ONE: Earthquake affected pe	ersons living in the IDP camp have sufficient								
shelter and quantities of emergency commodities.									
Results	Outcome								
Provision of 20 prefabricated shelters to	20 vulnerable families (100 individuals) benefit								
residents of Vahdat IDP camp.	from prefabricated shelters in Vahdat IDP								
	camp.								
Provision of 55,000 litres of kerosene in	400 families (2,000 individuals) receive								
Vahdat Camp for cooking.	kerosene in Vahdat Camp for cooking.								
Provision of 15,000 litres of diesel to Vahdat	400 families (2,000 individuals) receive free								
Camp bakery for cooking/baking	bread from Vahdat Camp diesel powered								
	bakery.								
Distribution of 600 sets of tools for	600 families (3,000 individuals) benefit from								
construction to families in villages of Zone	construction tools in villages of Zone One.								
One.	-								
Provision of 6,000 mosquito nets to the	MoH will distribute mosquito nets during								
Ministry of Health (MoH) for distribution	malaria season to benefit at least 12,000								
across Bam City.	individuals across Bam.								
<b>Total beneficiaries</b> : 2,000 (Vahdat Camp), 3,000 (Zone One), 12,000 (mosquito nets) = <b>17,000</b>									

OBJECTIVE TWO: Earthquake affected pe	ersons have access to primary health services.						
Results	Outcome						
Construction and equipping of two rural health	1,200 people in Pakam and 3,000 in Jorjand						
houses in earthquake affected villages.	benefit from services of health houses in their village; <sup>1</sup>						
Provision of temporary jobs for 22 local	22 skilled & unskilled local laborers employed						
laborers in construction of health houses.	in construction of health houses.						
Support for MoH training of Community	300 Community Health Workers benefit from 4						
Health Workers.	weeks of trainings supported by Mercy Corps.						
Five containers and complimentary equipment /	300 Community health workers benefit from						
furnishings procured to serve as meeting rooms	five containers and complimentary equipment /						
and training facilities for Community Health	furnishings which serve as meeting rooms and						
Workers.	training facilities.						
Hygiene promotion though posters and poster	9,000 individuals (children and teachers)						
contests in primary schools.	receive hygiene promotion messages though						
	posters and poster contests in primary schools.						
<b>Total beneficiaries:</b> 4,200 (health houses), approximately 300 (health workers & labors for							
construction), 9,000 (health messaging) = 13,500	)						

<b>OBJECTIVE THREE:</b> Earthquake affected persons have access to sufficient sanitation services.								
Results	Outcome							
Provision of 600 latrines and 920 showers to	6,964 individual people benefit from provision							
beneficiaries throughout Bam.	of latrines and showers throughout the City							
	(primarily Zones Eight, Nine and One).							
Maintenance of 48 showers and 55 latrines in	2,000 individuals benefit from showers and							
Vahdat camp.	latrines maintained in Vahdat camp.							
Monitoring of water provision to 7,500	Safe water delivered to 7,500 residents of Zone							
residents of Zone One.	One.							
Total beneficiaries: 2,000 (Vahdat Camp), 6,964 (individual family latrines / showers), and								
7,500 residents of Zone One receiving water = $16,464$								

# **TOTAL BENEFICIARIES<sup>2</sup>: 42,964**

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<sup>&</sup>lt;sup>1</sup> Mercy Corps is not able to provide indicators of health at this time as detailed in the original proposal (number of patients seen per day, incidence of diseases, morbidity rates etc) because the health houses have only very recently been completed.

<sup>&</sup>lt;sup>2</sup> This is an approximation based on the premise that beneficiaries of more than one activity, ie: shelters and camp latrines / showers or mosquito nets, are counted only once. Average post-earthquake family size is estimated by most sources to be five.

### **PROGRAM ACTIVITIES**

Objective One: Earthquake affected persons living in the IDP camp have sufficient shelter and quantities of emergency commodities

### (a) Temporary Shelter:

One hundred people benefited from Mercy Corps' construction of 20 shelters in the Vahdat IDP camp south west of the City center. Most of the residents in the Vahdat camp were not landowners, having previously lived in various rental properties across Bam. They had been living in tents in this camp since immediately after the earthquake. With summer approaching, including routine temperatures of over 120 degrees Fahrenheit and regular wind and dust storms, tents were not suitable to live in. They also did not provide people with adequate protection from theft and environmental hazards such as snakes and insects.

Beneficiary selection and allocation of prefabricated units was carried out by Mercy Corps together with Bam Government Task Force Representatives. To be selected for a shelter the beneficiary families had to be residing at the time in tents in the Vahdat camp and turn in their entitlement page for a free shelter.<sup>3</sup> As discussed in Mercy Corps' modification request of June 14, 2004, the Government of Iran stopped all construction of temporary shelters within city limits because it is thought to be a disincentive for choosing permanent housing. Therefore, even after an advocacy effort, Mercy Corps was only able to provide 20 shelters.

Land was allocated and given to Mercy Corps through the Bam Task Force. Each prefabricated shelter provides 18 square meters of living space, meeting Sphere standards of 3.5 sq. meters per person with an average family size of five. The shelters include windows, doors and electricity provision. Sandwich panel roofing and walls provide insulation against heat, cold and dust and are safe in the event of an earthquake. Twelve local laborers were hired by Mercy Corps to build the foundations for these shelters. A company was selected through competitive quotation analysis to provide and install the units themselves, with supervision throughout by Mercy Corps field engineers. All shelters have basic services such as water supply through tanks, garbage collection and free electricity supply. In addition, Mercy Corps maintained communal latrines.

In the spring, the Government embarked upon an ambitious program to provide prefabricated accommodation outside the city and soft loans to families for permanent reconstruction within the city limits. Most of the residents of the Vahdat Camp have now moved out of the camp. However, the 20 shelters built in April by Mercy Corps continue to be occupied by landless and poor families who have not been able to secure alternative accommodation. The government does not yet have a clear plan to build rental housing in Bam. The beneficiaries say that they are planning to live in these shelters until the government or house owners build permanent housing for rent, which is not anticipated to be until 2005 at the earliest.

### (b) Distribution of non-food items:

\*Fuel supply

Under this sub-objective, kerosene for cooking and diesel for baking ovens were provided to the whole population of the Vahdat IDP Camp, whose population peaked at 2,200 before falling off

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<sup>&</sup>lt;sup>3</sup> Every family residing in Bam with the head of household holding a Bam birth certificate was issued a coupon book from the City authorities for various benefits and free services following the earthquake. One page in this coupon book was designated for a free shelter.

in June as families were dispersed to prefabricated accommodation elsewhere. Distribution started in mid February and finished on June 12. During the emergency phase of the earthquake response, food and heat were essential for the people of the camp. During the winter they were using kerosene for their heaters and from March (when provision of cooked food ceased), they received just raw food ingredients, obliging them to cook for themselves by using their kerosene stoves.

Mercy Corps supplied a total of 55,000 liters of kerosene directly into the tanks of the camp. Each family had their own Jerry can (distributed by Islamic Relief), so when they needed fuel, they could easily get it from the kerosene tank. During the cold season, the main consumption of kerosene was by families using heaters to stay warm and to heat water for bathing, so sometimes Mercy Corps was filling the kerosene tank twice a day. All the residents of Vahdat camp had their own Atra (Heater/Stove), which had been distributed previously by Mercy Corps. In the spring, when the weather got warmer, the kerosene was used mostly for cooking by families who had no alternative source of fuel. Gradually, the consumption of fuel decreased as families began to move out and towards the end of the distribution period it was sometimes two weeks before the tank emptied.

The desel (totally 15,000 liters distributed) was used for the Vahdat Camp bakery, which baked free bread for the camp residents. Approximately every week to 10 days, the diesel tank was refilled. The kerosene tank level and the bakery were monitored on a daily basis by the Mercy Corps program officer and a camp resident who was hired for this purpose (Mr.Hosein Moazamzade). BAFIA were asked to issue a letter for fuel organization which authorized the delivery of kerosene or diesel to Mercy Corps representative. The fuel was then purchased and transported to the Vahdat Camp by using a tanker which was hired for the purpose.

#### \*Tools

A package of tools suitable for construction and agricultural activities were distributed to 600 farming families in the peri-urban villages of Zone One (items included wheelbarrows, shovels and saws). These tools were important in enabling the beneficiaries on the fringes of the city to clear their compounds of rubble and start preparing better shelters as they waited for the permanent construction of their homes to get underway. They have also been useful for tending to the date palm trees upon which the families' livelihoods depend - clearing blocked irrigation channels, pruning back and clearing palm leaves to support the new date crop, and applying fertilizer. The families who have received tools showed enormous appreciation to Mercy Corps, and were observed on a daily basis making use of the tools (wheelbarrows in particular) to restore order to their homes and stands of date palms in preparation for the late summer harvest.

A total of 600 toolkits were distributed to families (estimate 3,000 beneficiaries). Most of the items were procured in the neighboring provincial capital of Kerman and delivered by hired trucks. Beneficiaries were not individually selected (which would have been time consuming and caused disputes), but rather an assessment of the overall levels of need of different villages was made and the most neglected ones chosen, in close and careful coordination with the Ministry of Agriculture and NGOs like Medair and World Vision. Monitoring was carried out on a weekly basis by the national project manager and on average bi-weekly by the program director and/or visiting headquarters program staff.

#### \*Summary

In the modification of April 14, 2004, Mercy Corps estimated that the beneficiaries from non-food item distribution would total 13,200 including camp residents and non-camp population. To

date, 5000 camp residents have benefited from Mercy Corps' distribution activities. Once the mosquito nets are distributed (see below), a total of 17,000 people will benefit from non-food item distribution. Although not as many beneficiaries were reached as initially anticipated, the critical needs of camp residents and others were met. Mercy Corps' continual analysis of the situation on the ground in Bam produced data that distribution of non-food items was not necessary at the time when distribution of OFDA sponsored non-food items was possible. Therefore, in responding to the real needs of the population, fewer beneficiaries were reached with this component of the project.

### (c) Distribution of mosquito nets

To help prevent the spread of malaria and leishmaniasis<sup>4</sup> and keep insects away from people as they sleep, Mercy Corps worked with the Ministry of Health (MoH) to procure 6,000 family sized nets (one per family) that can hold up to four grown persons. The nets were made from standard specifications and materials and should be appropriate for usage in the years to come depending on appropriate maintenance by beneficiaries.

The need for mosquito nets was identified by program beneficiaries as a key need. Mercy Corps, in consultation with other invested groups, ended distribution of non-food items because this was no longer an acute need for camp residents. However, in the process of ending distribution, the need for mosquito nets was identified.

Tendering procedures were followed before going ahead with procurement, following which Mercy Corps selected one local company (for 2,000 nets) and one company from Tehran (4,000 nets). The nets were made, impregnated, and transported to Mercy Corps Bam who then delivered them in batches to the MoH for distribution. The average unit cost of each bednet was \$4.72.

Mercy Corps planned on implementing the selection of beneficiaries and the distribution of the mosquito nets during the life of the project. However, delays imposed by the MoH prevented these actions. Mercy Corps worked with the MoH to devise an alternate plan for distribution of the mosquito netting during the spring of 2005, when mosquito season begins again. This will mean that the nets will be distributed before and during the beginning of the season when the risk for malaria and leshmaniasis increases. The MoH is currently in possession of the nets with all associated documentation, including Mercy Corps-executed chemical testing of the nets.

Mercy Corps' initial intention was for the nets to benefit camp residents. However, the current agreement is that the MoH will determine where the nets are needed most at the beginning and during the next mosquito season.

This objective has assisted 2,000 earthquake affected persons currently living in Vadhat IDP camp, 3,000 persons living in Zone One, with the mosquito nets covering at least 12,000 individuals across the greater Bam area.

<sup>&</sup>lt;sup>4</sup>There have been a number of cases of leishmaniasis and malaria since the earthquake, although owing to the limited disease surveillance capacity of the MoH, comprehensive epidemiological surveillance has not yet been achieved.

### Objective Two: Earthquake affected persons have access to primary health services

# (a) Provision of health houses

Two health houses (primary health care posts) were built under this project in Pakam (a village 5 kilometers northwest of Bam city) and Jorjand (a village 20 km southeast of Bam city). Approximately 1,200 and 3,000 people respectively (4,200 in total) will benefit from the primary health services provided by these two health houses. These permanent structures will replace the rental facilities previously used as health houses (which were destroyed during the earthquake). Services provided include vaccines, pre-natal healthcare, family planning, pediatric care, first aid, contagious disease control, preventive care, and basic health care education.

Both buildings were designed according to MoH specifications and the location was determined in consultation with the local village councils. Each has a total size of 76 square meters, including six rooms as follows:

- a. One Medical Examination Room (3m x 4 m)
- b. One Injection Room (2.4m x 4m)
- c. One Lavatory (1.8m x 4m)
- d. One Equipment and Medic ine Storage Room (3.3m x 4 m)
- e. One Kitchen (2.4m x 4m)
- f. One Staff room (3m x 4m)

The health houses are equipped with an air conditioning unit, a water heater, a sink and some furniture and basic medical equipment. In terms of staffing, there are two nurses assigned to these health houses. A female nurse is assigned to serve female patients and a male nurse is assigned to serve male patients.

MoUs for the health houses were signed in March and April between Mercy Corps and the Ministry of Health after close coordination with and approval from city authorities, provincial health authorities, and the Bam Task Force. There was weekly coordination with all Governmental, UN and NGO agencies in the health sector throughout the project period to ensure synergy in efforts to reconstruct the city's entire network of primary health care facilities. Medical university engineers provided the drawings and detailed specifications for the construction of health houses, and bid documents were prepared for tendering the construction to local building companies. A company called Rashestan was selected as the contractor. Mercy Corps monitored and reported internally on construction progress roughly weekly, with the project field engineer visiting the construction sites on a daily basis. It took six months, rather than the intended four, to complete the buildings owing to delays on the part of the contractor. The direct unit cost for each health house was \$44,000.

The construction of the health houses provided temporary employment for 21 local laborers. Twenty-one families benefited from increased income with the construction of the health houses. Originally, it was thought that construction would provide as many as 50 temporary jobs. However, due to the pre-fabricated nature of the health house building, the contractor employed their own laborers because the construction required skilled specialists.

Prior to the inauguration of the new facilities in Pakam and Jorjand, local people were impatiently waiting to be able to start using them and benefiting from the health service provision. People were constantly asking when the health houses would be ready, since they are the main and only

primary health care resource in these areas. Nurses have already been assigned by the Ministry of Health to both locations.

Mercy Corps turned over the buildings to the Bam Ministry of Health in September, in accordance with MoUs signed in March and April. Henceforth the ministry shall be responsible for maintaining the health house buildings as part of the Iranian national healthcare system, just as it did before the earthquake. The annual operating budget for each health house is equivalent to \$5,614, with the additional annual salary for each nurse equivalent to \$2,750. The total annual budget plus salaries for two nurses for each health house is therefore equivalent to \$11,114.

## (b) Training of Community Health Workers and container provision

Before the earthquake, the MoH managed a system of Community Health Workers (CHWs), in Bam, one for every 35 families. This is part of a national system of community based health coverage provided by volunteers trained to a basic level in primary health care provision. More than half of the CHWs in Bam were killed in the earthquake, making the training of new CHWs a priority.

Approximately 300 CHW volunteers selected by the MoH (each one covering an average of 35 families) were trained over the summer months in Bam. Mercy Corps supported four weeks of training (one week being one complete session) and Oxfam supported another two weeks (two sessions). The sessions followed the traditional CHW curricula with additional topics relevant to post-disaster and communication skills. Mercy Corps initiated a collaborative support group to initiate the training, mobilize existing CHWs and recruit trainees. The MoH, Oxfam, UNICEF and the WHO were the main agencies participating in this support group, which coordinated curricula, training presentations and logistics. Mercy Corps also created a basic pre and post-test (used in Mercy Corps and Oxfam supported sessions) to evaluate the success of the training, as well as providing logistical support to the MoH.

In order to further assist the work of the CHWs, five 36sq meter container offices were procured and furnished as offices by Mercy Corps to provide a training and meeting location for the CHWs that will help them to advance their knowledge and practice. The containers were placed within the main MoH compound in Bam establishing a central meeting place and training venue for the CHWs and facilitating close collaboration between the CHWs and relevant MoH departments and senior staff. The funds that went to this activity were originally planned for the creation of a Disaster Response Health Promotion Manual. During program implementation, it was determined that the production of this manual was not possible because it would require a lengthy process of soliciting input and approval from various MoH departments that would extend past the life of the project.

Mercy Corps also monitored the work of the newly trained Community Health Workers using a monitoring format co-designed with the MoH.

Mercy Corps extended the training of CHWs through a SPHERE training of trainers funded through private donations. Two Iranians were trained in India on the SPHERE standards and training techniques for training others in SPHERE. The two attendees have committed to training 80 CHWs by May of 2005.

<sup>&</sup>lt;sup>5</sup> CHWs provide basic health messages about topics such as breastfeeding, hygiene, food, and vaccinations in addition to carrying out various campaigns (such as the polio campaign carried out in April '04). They visit their assigned families on average once per week.

### (c) Hygiene promotion

Mercy Corps undertook a series of hygiene promotion activities under complimentary projects supported by the European Community (ECHO) as well as OFDA. OFDA supported hygiene promotion activities included a poster contest focused on appropriate hygiene for post earthquake sanitation conditions, centering on use of communal or family latrines. Four main messages were disseminated to approximately 9,000 primary school children across Bam: hand washing after using the latrine, leave the latrine as clean as you found it, clean on regular basis, and keep the latrine door closed. Each message was assigned to a different school grade level and pictures were given out for the children to color (or to inspire them to draw their own) along with a health message that teachers could incorporate into their normal health lessons. The school chose the top pictures and delivered them to Mercy Corps, which chose four winners. The winning pictures were made into a color poster which was printed and placed in Mercy Corps latrines, as well as given to other NGO's and the MoH for further distribution.

Coordination with other stakeholders for the hygiene promotion activities was lead by Mercy Corps' health officer, who attended both health and water and sanitation weekly meetings and coordinated closely with all relevant organizations as well as with the MoH.

This objective will assist approximately 4,200 earthquake affected persons located in the service area of the health houses, 9,000 children through dissemination of health messages, as well as 300 Community Health Workers and the much larger number of beneficiaries who they will serve following their training and facility provision.

### Objective Three: Earthquake affected persons have access to sufficient sanitation services

### (a) Provision of latrines and showers

Among the greatest unmet needs of beneficiaries in Bam both immediately after the earthquake and in the months following was access to sanitation facilities. Mercy Corps was one of a small number of NGOs that was able to continue to respond to this ongoing need beyond the initial three month post-emergency period, anticipating that the communal camp facilities hastily installed by most agencies would not answer sanitation requirements beyond the very short term. Beneficiaries in all target areas repeatedly requested Mercy Corps to assist in the provision of more latrine and shower units, and both the Ministry of Health and Bam Task Force made numerous requests to NGOs to support in this sector. In close coordination with the MoH, Bam Task Force, district assigned local authorities, Red Crescent and UNICEF, as well as other NGOs, Mercy Corps volunteered to take on the provision of latrine and shower units to Zones eight and nine, expanding to other areas later. A total of 1,520 units were manufactured and distributed with OFDA funding (see Annex A *Distribution Breakdown of Showers and Latrines in Bam*). This number surpasses our expected result as outlined in the modification of June 14, 2004; we proposed 560 latrines and 610 showers and accomplished construction of 600 latrines and 920 showers.

Mercy Corps' sanitation units consisted of a steel frame measuring 1m by 1m covered by galvanized steel sheets to ensure durability and privacy in all weather conditions. The structures stay vertical in the often windy conditions in Bam and are appropriate for use by all sectors of the population excluding those with severe handicaps. The average unit cost for the latrines was \$72

and for the shower was \$91.50 (excluding transportation, installation, and labor costs). Initially, Mercy Corps set up its own workshop manufacturing latrine and shower cubicles. After a while, to speed up production, the basic specifications were given to contractors who made samples and prepared bids. Contracts were then awarded, and on completion of each batch the cubicles were delivered to Mercy Corps for onward distribution by Mercy Corps hired trucks to the appropriate sites.

In our selection, Mercy Corps made sure that the first beneficiaries were from the most vulnerable categories of people such as those recommended by the social services or those families with a high number of children. We asked the people who were materially and physically better off to install their own cubicles under the supervision, where necessary, of the district local authorities. Mercy Corps provided cement (in 300 cases) and labor to install cubicles for families with female, elderly or disabled-headed households – approximately 15% of the total <sup>6</sup>

As well as regular monitoring by the project staff, a beneficiary sampling survey was carried out at the end of the project by one of Mercy Corps' female employees from Bam to gage the impact of the sanitation activities. Beneficiaries responded positively about how useful and important the latrine and/or shower units had been to them, with many emphasizing how culturally important it was for them to not have to use communal facilities, particularly for female or elderly family members. Hygiene in communal facilities had been much harder to maintain and access was too restricted. There were a small number of complaints that the size of the showers was too small or that permanent facilities would have been better, but overall people appreciated that under the circumstances they were lucky to have access to the good quality units provided by Mercy Corps. A great deal of thanks was expressed that the cubicles had been provided so fast and efficiently relative to other parts of the city.

In the final rounds of field monitoring, it was noted that more than 95% of the latrines and showers distributed were still in use, with beneficiaries generally maintaining and repairing their own cubicles well in the knowledge that it will probably be at least another year, if not two, before most homes are permanently rebuilt and municipal sewage and water supply systems are fully reestablished.

In the last of the weekly water and sanitation coordination meetings attended by Mercy Corps on September 20, 2004, the Bam Task Force requested another 9,000 sanitation units and asked NGOs in particular to help make up the shortfall together with the government. Mercy Corps continues to be repeatedly requested by individuals and the city authorities to provide additional numbers of latrines and showers to hitherto uncovered parts of the city. It is hoped that UNICEF will be able to respond to this need in the coming months.

### (b) Maintenance of latrines in Vahdat Camp

Communal latrines in Vahdat camp were installed in January and February by Mercy Corps and other agencies in association with housing provision and non-food item distribution. After that time, Mercy Corps supported the repair and maintenance of the latrines in Vahdat camp to ensure that they continued functioning and benefiting the 2000 camp residents. Mercy Corps supported

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<sup>&</sup>lt;sup>6</sup> Some units were also provided by Mercy Corps to external childcare facilities. Four recreational centers providing psychosocial support to 869 children under the age of 18 run by the NGO Terre des Hommes were given cubicles. A local NGO, the Association for the Protection of Child Labor, was given 3 latrines for its centre to mark "Celebration of Children Day". In addition, two kindergartens in desperate need of sanitation facilities were provided with one latrine and one shower each.

this activity until after the majority of camp residents had moved on. Families living in the shelters continue to share and maintain these facilities.

(c) Supervision of water truck distribution of water in Zone One

To secure clean and sufficient drinking water for vulnerable residents of Zone One, Mercy Corps agreed to supervise three water trucks rented by Caritas to distribute water to water tanks in this area. Mercy Corps worked with the Village Councils in Zone One to identify capable individuals to supervise the distribution on a daily basis, enabling Caritas to support this much needed water supply activity. Mercy Corps also worked closely with the Bam City Water Bureau and the tanker drivers to ensure adequate coverage and proper schedules for the tankers.

Before Caritas provided the tanked water, Zone One residents were not receiving sufficient water from water pipes for daily tasks and not enough tanked water for drinking. As Mercy Corps carried out the monitoring for Caritas (who do not have the capacity to do this on their own), the tanked water provided residents of this rural area with much-needed clean water through the summer months. Two kinds of monitoring forms were prepared, one to monitor the water truck drivers to demonstrate that they were maintaining their agreed schedules (three times a day according to their contract with Caritas) and one showing the number of people who received water each day with signatures upon delivery.

Activities under this objective Mercy Corps provided 2,505 earthquake affected persons with sanitation facilities, maintained latrines in Vahdat camp to benefit 2,000 camp residents, and delivered safe water to 7,500 camp residents of Zone One.

### Management

Altogether, five expatriates and 14 national staff were wholly or partly involved in directly implementing this project. Mercy Corps managed the various components of this project through four sectoral program managers and their support staff – one for construction (expatriate), one for non-food item distribution (national), one for water and sanitation (national) and one for health promotion (expatriate). The Bam Program Director oversaw the entire grant and monitored activities on a monthly basis, as well as served as the lead on all the important representation and networking requirements with the government ministries, the UN and other NGOs. Financial management was carried out by one international finance manager and one national finance officer and two administration / finance officers. The expatriate Program Support Manager worked on the project for three months to ensure full compliance and following of Mercy Corps administration, procurement and security systems.

As well as the monitoring detailed under project activities above, all project managers reported at least twice per week to the Program Director, with team meetings taking place each Wednesday. Internal written reports were also submitted monthly, compiled and sent at intervals to headquarters. As well as substantial on the job training for national staff from the expatriate staff, there was a large teambuilding workshop in July to train staff in group work skills.

Mercy Corps' headquarters Senior Program Officer made a total of three trips to Bam during the project period to give managerial and program support to the Bam team, and the Director of Operations and Middle East Regional Finance Manager both came to monitor the project in May.

### Coordination

As detailed above under individual activities, Mercy Corps strove to ensure optimal effectiveness of the project by working as closely as possible with all stakeholders in Bam. This entailed coordination on at least a weekly basis with each of the relevant Government Ministries and the Bam Task Force at the weekly sectoral meetings. Importantly, it also meant talking with ordinary people in Bam each day to try and keep on the pulse of what was needed by potential beneficiaries and not let preconceptions of what had to be done drive the implementation process. Informal coordination with NGOs implementing similar projects was constant, particularly World Vision (for water and sanitation), Merlin (for health house provision) and Medair (for toolkit distribution). The Bam City Council, a respected body of representatives of the City whose views often clashed with those of the Government itself, was also consulted regularly, as was the Mayor of Bam Mr Bagheri.

#### Constraints

- Ensuring visas and the continuous in country presence of expatriate managers was managed, but proved to be a constant struggle and drain on the energies of several staff. The Iranian Government's decisions regarding granting and extending visas became increasingly arbitrary with long delays, especially during the second half of the project period.
- Despite the best efforts of the Mercy Corps health team, it proved impossible to push forward the design and approval of new health promotion materials and manuals within the project timeframe, as a result of the long time required to achieve consensus between different parts of the Ministry of Health. This necessitated several minor changes of plan to ensure that Mercy Corps was able to deliver maximum healthcare benefits according to the second objective of the project including the decision to purchase containers and equipment for the community health workers instead of producing the manuals.
- There were substantial setbacks and contradictory requests from Iranian Government departments and representatives of the City and Municipal councils in authorizing the construction of shelters and health houses.
- The distribution of non-food items was slowed significantly by abrupt changes in the Iranian Red Crescent's policy, including the blocking of all distribution, insistence on the delivery of certain items at certain times only, reallocation of target zones to different NGOs without consultation, and a general lack of coordination which resulted in duplication of the distributions of other NGOs and the International Federation of the Red Cross.
- Difficult working and living conditions: heat, duststorms and lack of adequate office and accommodation space.

## Lessons learned

- The ECHO-funded water/sanitation program of latrine and shower provision and health promotion tied in very well with similar activities carried under OFDA. Mercy Corps should attempt to replicate such complimentary programming in future humanitarian operations.
- Given the rapidly changing operating environment and frequent confusion on the part of the governmental authorities in terms of decision making, it would have been good to draw up a range of contingency plans during the design phase of the project cycle and

include these contingencies in the initial proposal, so the donor can already be aware of likely activity adaptations that may be necessary during implementation before the modification request is formally submitted.

### Conclusion

Mercy Corps has successfully implemented this project according to all three of its main objectives: shelter and non-food item support, provision of access to primary health care, and water and sanitation. Despite changing patterns of need and the constraints outlined above, it has been possible to adapt the project to meet the priority needs of the victims of the Bam earthquake and substantially increase the numbers of individuals benefiting from each activity compared to what had originally been anticipated. OFDA's flexibility to support these adaptations in program has been of great help in this respect.

### **ANNEXES**

ANNEX A: Distribution Breakdown of Showers and Latrines in Bam

# **Distribution of Showers & Latrine in Bam**

					]	Distribut	ion Status	5					
Zone	Bam Residents		MOH Staff		Social Services Staff		Social Service Patients		Special Centers		Total		Total
	Shower	Latrine	Shower	Latrine	Shower	Latrine	Shower	Latrine	Shower	Latrine	Shower	Latrine	
1	141	35	1	0	1	1	11	3	0	4	154	43	197
2	5	3	0	0	1	1	2	1	0	0	8	5	13
3	7	4	0	0	1	0	1	1	0	0	9	5	14
4	6	6	0	0	0	0	1	0	0	0	7	6	13
5	11	13	1	0	4	4	6	5	0	5	22	27	49
6	13	8	1	1	1	1	1	0	0	0	16	10	26
7	13	6	2	2	0	0	3	2	0	0	18	10	28
8	343	243	0	0	0	0	3	3	0	0	346	246	592
9	255	202	0	0	4	3	1	0	0	0	260	205	465
10	18	9	1	1	1	1	2	1	0	0	22	12	34
11	23	16	3	4	3	2	3	3	1	1	33	26	59
12	19	1	0	0	0	0	1	1	0	0	20	2	22
13	2	2	0	0	0	0	2	0	1	1	5	3	8
Total	856	548	9	8	16	13	37	20	2	11	020 (00		
Total	1404 17				29 57			13		920	600	1520	
<b>Total</b>	1520									15			